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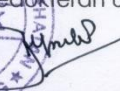
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LAMPIRAN

Lampiran 1. *Ethical Clearance*

	<p align="center">KOMISI ETIK PENELITIAN KESEHATAN (KEPK) FAKULTAS KEDOKTERAN UNIVERSITAS DIPONEGORO DAN RSUP dr KARIADI SEMARANG Sekretariat : Kantor Dekanat FK Undip Lt.3 Jl. Dr. Soetomo 18. Semarang Telp/Fax. 024-8318350</p>	
<p align="center">ETHICAL CLEARANCE No. 325/EC/FK-RSDK/2016</p>		
<p>Komisi Etik Penelitian Kesehatan Fakultas Kedokteran Universitas Diponegoro-RSUP. Dr. Kariadi Semarang, setelah membaca dan menelaah Usulan Penelitian dengan judul :</p>		
<p align="center">"FAKTOR-FAKTOR YANG MEMPENGARUHI FUNGSI KOGNITIF PENDERITA STROKE NON HEMOGARIK"</p>		
<p>Peneliti Utama : Arina Pramudita Triasti</p>		
<p>Pembimbing : Dr. dr. Dwi Pudjonarko, M.Kes, Sp.S(K)</p>		
<p>Penelitian : Dilaksanakan di Poli Saraf RSUP. Dr. Kariadi Semarang</p>		
<p>Setuju untuk dilaksanakan, dengan memperhatikan prinsip-prinsip yang dinyatakan dalam Deklarasi Helsinki 1975, yang diamended di Seoul 2008 dan Pedoman Nasional Etik Penelitian Kesehatan (PNEPK) Departemen Kesehatan RI 2011</p>		
<p>Peneliti harus melampirkan 2 kopi lembar Informed Consent yang telah disetujui dan ditanda tangani oleh peserta penelitian pada laporan penelitian.</p>		
<p>Peneliti diwajibkan menyerahkan :</p> <ul style="list-style-type: none"> - Laporan kemajuan penelitian (<i>clinical trial</i>) - Laporan kejadian efek samping jika ada ✓ - Laporan ke KEPK jika penelitian sudah selesai & dilampiri Abstrak Penelitian 		
<p align="right">Semarang, 28 MAR 2016</p> <p align="right">Komisi Etik Penelitian Kesehatan Fakultas Kedokteran Undip-RS. Dr. Kariadi</p> <p align="right">  Prof. Dr. dr. Suprihati, M.Sc, Sp.THT-KL(K) NIP. 19500621 197703 2 001 </p>		

Lampiran 2. Surat Ijin Penelitian



KEMENTERIAN KESEHATAN RI DIREKTORAT JENDERAL BINA UPAYA KESEHATAN RUMAH SAKIT UMUM PUSAT DOKTER KARIADI

Jl. Dr. Sutomo No. 16 Semarang, PO Box 1104
Telepon : (024) 8413993, 8413476, 8413764 Fax : (024) 8318617

Website : <http://www.rskariadi.co.id> email : humas_rskariadi@yahoo.co.id, rsdk@indosat.net.id



SURAT IZIN MELAKSANAKAN PENELITIAN

DL.00.02 / I.II / 1278 / 2016

Yang bertanda tangan di bawah ini :

Nama : dr. Darwito, SH, Sp.B, Sp.B(K)Onk
N I P : 19600203 198803 1 003
Jabatan : Direktur Medik dan Keperawatan RSUP Dr. Kariadi

Memberikan izin melakukan penelitian untuk :

Ketua peneliti : Arina Pramudita Triasti
Institusi : Prodi Sarjana Kedokteran FK UNDIP
Judul penelitian : Faktor-Faktor Yang Mempengaruhi Fungsi Kognitif Penderita Stroke Non Hemoragia (Studi di RSUP Dr. Kariadi Semarang)
Lokasi penelitian : 1. Poli Saraf
2. Instalasi Rekam Medis

Untuk melaksanakan kegiatan penelitian selama 3 Bulan, terhitung mulai sejak diterbitkannya surat izin penelitian ini.

Peneliti wajib :

1. Melampirkan *Informed Consent* pada rekam medis responden
2. Melaporkan monitoring evaluasi penelitian secara periodik ke Bagian Diklit
3. Mengumpulkan Laporan selesai penelitian dengan menyerahkan monitoring evaluasi penelitian ke Bagian Diklit
4. Menyerahkan laporan hasil akhir penelitian (1 berkas)

Semarang, 08 APR 2016

An. Direktur Utama
Direktur Medik dan Keperawatan



dr. Darwito, SH, Sp.B, Sp.B(K)Onk
NIP. 19600203 198803 1 003



KEMENTERIAN KESEHATAN RI
DIREKTORAT JENDERAL BINA UPAYA KESEHATAN
RUMAH SAKIT UMUM PUSAT DOKTER KARIADI

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Nomor : DL.00.02 / I.II / 1279 / 2016
 Lamp. : -
 Perihal : Penelitian

08 APR 2016

Yth. Dekan Fakultas Kedokteran
 Universitas Diponegoro
 Jl. Prof. H. Soedarto, SH - Tembalang
 di -

SEMARANG

Menindak lanjuti surat Saudara No. 1918/UN7.3.4/D1/PP/2016 tanggal 4 Maret 2016 perihal Permohonan ijin penelitian, dengan ini kami sampaikan bahwa :

Nama peneliti : Arina Pramudita Triasti
 Institusi peneliti : Prodi Sarjana Kedokteran Fakultas Kedokteran UNDIP
 Judul penelitian : Faktor-Faktor Yang Mempengaruhi Fungsi Kognitif Penderita Stroke Non Hemoragia (Studi di RSUP Dr. Kariadi Semarang)

Pada prinsipnya diizinkan untuk melaksanakan Penelitian di Instalasi Rawat Jalan dan Instalasi Rekam Medis RSUP Dr. Kariadi dengan ketentuan :

- ✚ Waktu pelaksanaan penelitian dapat dilakukan sewaktu hari kerja selama \pm 3 bulan, dengan jumlah sampel yang dibutuhkan adalah \pm 22 responden
- ✚ Peneliti mentaati Pedoman Penelitian RSUP Dr. Kariadi.
- ✚ Sebelum melakukan penelitian, peneliti agar bertemu Kepala Instalasi dan Kepala Ruangan dengan membawa Surat Izin Penelitian.
- ✚ Tidak mengganggu pelayanan.
- ✚ Memberikan laporan hasil penelitian kepada Bagian Diklit RSUP Dr. Kariadi.

Atas perhatian dan kerjasama Saudara diucapkan terima kasih.

An. Direktur Utama
 Direktur Medik dan Keperawatan



dr. Darwito, SH, Sp.B, Sp.B(K)Onk
 NIP. 19600203 198803 1 003

Tembusan Yth :

1. Ka. Instalasi Rawat Jalan
2. Ka. Instalasi Rekam Medis
3. Yana bersanakutan



**KEMENTERIAN RISET, TEKNOLOGI DAN PENDIDIKAN TINGGI
UNIVERSITAS DIPONEGORO
FAKULTAS KEDOKTERAN**

Jl. Prof. H. Soedarto, SH – Tembalang – Semarang Telepon 024-76928010, Fax. 024-76928011
Email : dean_fmdu@undip.ac.id

Nomor : 1918 /UN7.3.4/D1/PP/2016 04 MAR 2016
Lampiran : 1 (satu) bendel
Perihal : Permohonan ijin penelitian dan peminjaman data rekam medik

Yth. Direktur Utama
RSUP Dr. Kariadi
Semarang

Bersama ini kami hadapkan mahasiswa Program Studi Pendidikan Dokter Fakultas Kedokteran Universitas Diponegoro Semarang :

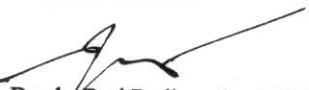
Nama/ NIM : Arina Pramudita Triasti / 22010112130177
Semester : VIII (delapan)

Mohon diijinkan melakukan penelitian di Poli Saraf RSUP Dr Kariadi Semarang dan meminjam data rekam medik di Instalasi Rekam Medik RSUP Dr. Kariadi Semarang, dalam rangka penyusunan Karya Tulis Ilmiah mahasiswa. Terlampir proposal mahasiswa yang bersangkutan.

Judul KTI : Faktor – Faktor yang Mempengaruhi Fungsi Kognitif Penderita Stroke Non Hemoragik (Studi di RSUP Dr. Kariadi Semarang)
Pembimbing : Dr.dr. Dwi Pudjonarko, M.Kes., Sp.S(K)

Atas perhatian dan kerjasamanya diucapkan terima kasih.

a.n Dekan
Pembantu Dekan I


Dr. dr. Dwi Pudjonarko, M.Kes., Sp.S(K)
NIP. 196607201995121001

Tembusan :

1. Dekan (sebagai laporan)
2. Ketua Tim Karya Tulis Ilmiah
3. Kepala Bagian Diklit RSUP Dr. Kariadi Semarang
4. Kepala Instalasi Rekam Medik RSUP Dr. Kariadi Semarang
5. Pembimbing

Lampiran 3. Data Hasil Pemeriksaan

CM	Usia	J. Kelamin	Riwayat Keluarga	HT	Riwayat Kardiovas	DM	Dislipidemia	Obes	Rokok	Sedentari	MMSE	Fungsi Kognitif
C578101	57	Pria	Tidak	Tidak	Tidak	Ya	Tidak	Ya	Ya	Tidak	29	Normal
C491504	54	Wanita	Ya	Tidak	Tidak	Tidak	Tidak	Tidak	Tidak	Tidak	25	Normal
C563135	45	Pria	Tidak	Tidak	Tidak	Ya	Ya	Tidak	Ya	Tidak	21	Gangguan fungsi kognitif
C365542	58	Wanita	Tidak	Ya	Ya	Tidak	Tidak	Tidak	Tidak	Ya	12	Gangguan fungsi kognitif
C540137	51	Wanita	Tidak	Ya	Tidak	Tidak	Tidak	Tidak	Tidak	Ya	28	Normal
C095010	55	Wanita	Ya	Tidak	Ya	Ya	Tidak	Ya	Tidak	Tidak	18	Gangguan fungsi kognitif
C540339	53	Pria	Tidak	Ya	Ya	Tidak	Ya	Tidak	Ya	Tidak	29	Normal
C551134	48	Pria	Ya	Ya	Tidak	Ya	Tidak	Tidak	Tidak	Tidak	26	Normal
B425059	60	Wanita	Tidak	Ya	Tidak	Ya	Ya	Tidak	Tidak	Tidak	27	Normal
C361071	59	Pria	Tidak	Ya	Tidak	Tidak	Ya	Ya	Tidak	Tidak	28	Normal
C366169	58	Pria	Tidak	Ya	Ya	Ya	Tidak	Tidak	Ya	Tidak	28	Normal
C533443	51	Wanita	Tidak	Ya	Tidak	Ya	Ya	Tidak	Tidak	Tidak	30	Normal
C585624	51	Wanita	Tidak	Ya	Tidak	Tidak	Ya	Tidak	Tidak	Tidak	28	Normal
C208631	59	Wanita	Tidak	Ya	Tidak	Ya	Ya	Ya	Tidak	Ya	25	Normal
C586491	45	Wanita	Tidak	Ya	Tidak	Ya	Ya	Tidak	Tidak	Tidak	27	Normal

Lampiran 4. Hasil Analisa Statistik

Frequencies

Onset Stroke

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0	5	33.3	33.3	33.3
	1	10	66.7	66.7	100.0
	Total	15	100.0	100.0	

Klasifikasi Usia

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	< 50	3	20.0	20.0	20.0
	50 - 59	11	73.3	73.3	93.3
	>= 60	1	6.7	6.7	100.0
	Total	15	100.0	100.0	

Jenis Kelamin

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Wanita	9	60.0	60.0	60.0
	Pria	6	40.0	40.0	100.0
	Total	15	100.0	100.0	

Riwayat Keluarga

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Ya	3	20.0	20.0	20.0
	Tidak	12	80.0	80.0	100.0
	Total	15	100.0	100.0	

Hipertensi

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Ya	11	73.3	73.3	73.3
	Tidak	4	26.7	26.7	100.0

Total	15	100.0	100.0
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Stage Hipertensi

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Prahipertensi	4	36.4	36.4	36.4
	Hipertensi Stage I	7	63.6	63.6	100.0
	Total	11	100.0	100.0	

Penyakit Kardiovaskular

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Ya	4	26.7	26.7	26.7
	Tidak	11	73.3	73.3	100.0
	Total	15	100.0	100.0	

Diabetes Mellitus

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Ya	9	60.0	60.0	60.0
	Tidak	6	40.0	40.0	100.0
	Total	15	100.0	100.0	

Dislipidemia

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Ya	8	53.3	53.3	53.3
	Tidak	7	46.7	46.7	100.0
	Total	15	100.0	100.0	

Obesitas

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Ya	4	26.7	26.7	26.7
	Tidak	11	73.3	73.3	100.0
	Total	15	100.0	100.0	

Merokok

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Ya	4	26.7	26.7	26.7
	Tidak	11	73.3	73.3	100.0
	Total	15	100.0	100.0	

Pola Hidup Sedentari

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Ya	3	20.0	20.0	20.0
	Tidak	12	80.0	80.0	100.0
	Total	15	100.0	100.0	

Fungsi Kognitif

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Normal	12	80.0	80.0	80.0
	Gangguan Fungsi Kognitif	3	20.0	20.0	100.0
	Total	15	100.0	100.0	

Nonparametric Correlations**Correlations**

			Usia Responden	MMSE
Spearman's rho	Usia Responden	Correlation Coefficient	1.000	-.056
		Sig. (2-tailed)	.	.842
		N	15	15
	MMSE	Correlation Coefficient	-.056	1.000
		Sig. (2-tailed)	.842	.
		N	15	15

Onset Stroke * Fungsi Kognitif**Crosstab**

			Onset Stroke		Total
			3 bulan	> 3 bulan	
Fungsi Kognitif	Gangguan Fungsi Kognitif	Count	0	3	3
		% within Fungsi Kognitif	0.0%	100.0%	100.0%

Normal	Count	5	7	12
	% within Fungsi Kognitif	41.7%	58.3%	100.0%
Total	Count	5	10	15
	% within Fungsi Kognitif	33.3%	66.7%	100.0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	1.875 ^a	1	.171	.505	.264
Continuity Correction ^b	.469	1	.494		
Likelihood Ratio	2.795	1	.095		
Fisher's Exact Test					
Linear-by-Linear Association	1.750	1	.186		
N of Valid Cases	15				

a. 3 cells (75.0%) have expected count less than 5. The minimum expected count is 1.00.

b. Computed only for a 2x2 table

Risk Estimate

	Value	95% Confidence Interval	
		Lower	Upper
For cohort Onset Stroke = > 3 bulan	1.714	1.063	2.765
N of Valid Cases	15		

Jenis Kelamin * Fungsi Kognitif

Crosstab

			Fungsi Kognitif		Total
			Gangguan Fungsi Kognitif	Normal	
Jenis Kelamin	Wanita	Count	2	7	9
		% within Fungsi Kognitif	66.7%	58.3%	60.0%
	Pria	Count	1	5	6
		% within Fungsi Kognitif	33.3%	41.7%	40.0%
Total	Count		3	12	15
	% within Fungsi Kognitif		100.0%	100.0%	100.0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	.069 ^a	1	.792		
Continuity Correction ^b	.000	1	1.000		
Likelihood Ratio	.071	1	.790		
Fisher's Exact Test				1.000	.659
Linear-by-Linear Association	.065	1	.799		
N of Valid Cases	15				

a. 3 cells (75.0%) have expected count less than 5. The minimum expected count is 1.20.

b. Computed only for a 2x2 table

Risk Estimate

	Value	95% Confidence Interval	
		Lower	Upper
Odds Ratio for Jenis Kelamin (Wanita / Pria)	1.429	.100	20.437
For cohort Fungsi Kognitif = Gangguan Fungsi Kognitif	1.333	.153	11.641
For cohort Fungsi Kognitif = Normal	.933	.566	1.539
N of Valid Cases	15		

Riwayat Keluarga * Fungsi Kognitif**Crosstab**

			Fungsi Kognitif		Total
			Gangguan Fungsi Kognitif	Normal	
Riwayat Keluarga	Ya	Count	1	2	3
		% within Fungsi Kognitif	33.3%	16.7%	20.0%
	Tidak	Count	2	10	12
		% within Fungsi Kognitif	66.7%	83.3%	80.0%
Total	Count		3	12	15
	% within Fungsi Kognitif		100.0%	100.0%	100.0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	.417 ^a	1	.519		
Continuity Correction ^b	.000	1	1.000		
Likelihood Ratio	.380	1	.538		
Fisher's Exact Test				.516	.516
Linear-by-Linear Association	.389	1	.533		
N of Valid Cases	15				

a. 3 cells (75.0%) have expected count less than 5. The minimum expected count is .60.

b. Computed only for a 2x2 table

Risk Estimate

	Value	95% Confidence Interval	
		Lower	Upper
Odds Ratio for Riwayat Keluarga (Ya / Tidak)	2.500	.146	42.800
For cohort Fungsi Kognitif = Gangguan Fungsi Kognitif	2.000	.260	15.381
For cohort Fungsi Kognitif = Normal	.800	.346	1.852
N of Valid Cases	15		

Hipertensi * Fungsi Kognitif**Crosstab**

			Fungsi Kognitif		Total
			Gangguan Fungsi Kognitif	Normal	
Hipertensi	Ya	Count	1	10	11
		% within Fungsi Kognitif	33.3%	83.3%	73.3%
	Tidak	Count	2	2	4
		% within Fungsi Kognitif	66.7%	16.7%	26.7%
Total		Count	3	12	15
		% within Fungsi Kognitif	100.0%	100.0%	100.0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	3.068 ^a	1	.080		

Continuity Correction ^b	1.044	1	.307		
Likelihood Ratio	2.765	1	.096		
Fisher's Exact Test				.154	.154
Linear-by-Linear Association	2.864	1	.091		
N of Valid Cases	15				

a. 3 cells (75.0%) have expected count less than 5. The minimum expected count is .80.

b. Computed only for a 2x2 table

Risk Estimate

	Value	95% Confidence Interval	
		Lower	Upper
Odds Ratio for Hipertensi (Ya / Tidak)	.100	.006	1.712
For cohort Fungsi Kognitif = Gangguan Fungsi Kognitif	.182	.022	1.500
For cohort Fungsi Kognitif = Normal	1.818	.670	4.931
N of Valid Cases	15		

Stage Hipertensi * Fungsi Kognitif

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	.629 ^a	1	.428		
Continuity Correction ^b	.000	1	1.000		
Likelihood Ratio	.960	1	.327		
Fisher's Exact Test				1.000	.636
Linear-by-Linear Association	.571	1	.450		
N of Valid Cases	11				

a. 3 cells (75.0%) have expected count less than 5. The minimum expected count is .36.

b. Computed only for a 2x2 table

Risk Estimate

	Value	95% Confidence Interval	
		Lower	Upper
For cohort Stage Hipertensi = Hipertensi Stage I	.600	.362	.995
N of Valid Cases	11		

Penyakit Kardiovaskular * Fungsi Kognitif

Crosstab

			Fungsi Kognitif		Total
			Gangguan Fungsi Kognitif	Normal	
Penyakit Kardiovaskular	Ya	Count	2	2	4
		% within Fungsi Kognitif	66.7%	16.7%	26.7%
	Tidak	Count	1	10	11
		% within Fungsi Kognitif	33.3%	83.3%	73.3%
Total		Count	3	12	15
		% within Fungsi Kognitif	100.0%	100.0%	100.0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	3.068 ^a	1	.080		
Continuity Correction ^b	1.044	1	.307		
Likelihood Ratio	2.765	1	.096		
Fisher's Exact Test				.154	.154
Linear-by-Linear Association	2.864	1	.091		
N of Valid Cases	15				

a. 3 cells (75.0%) have expected count less than 5. The minimum expected count is .80.

b. Computed only for a 2x2 table

Risk Estimate

	Value	95% Confidence Interval	
		Lower	Upper
Odds Ratio for Penyakit Kardiovaskular (Ya / Tidak)	10.000	.584	171.202
For cohort Fungsi Kognitif = Gangguan Fungsi Kognitif	5.500	.667	45.371
For cohort Fungsi Kognitif = Normal	.550	.203	1.492
N of Valid Cases	15		

Diabetes Mellitus * Fungsi Kognitif

Crosstab

			Fungsi Kognitif		Total
			Gangguan Fungsi Kognitif	Normal	
Diabetes Mellitus	Ya	Count	2	7	9
		% within Fungsi Kognitif	66.7%	58.3%	60.0%
	Tidak	Count	1	5	6
		% within Fungsi Kognitif	33.3%	41.7%	40.0%
Total		Count	3	12	15
		% within Fungsi Kognitif	100.0%	100.0%	100.0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	.069 ^a	1	.792		
Continuity Correction ^b	.000	1	1.000		
Likelihood Ratio	.071	1	.790		
Fisher's Exact Test				1.000	.659
Linear-by-Linear Association	.065	1	.799		
N of Valid Cases	15				

a. 3 cells (75.0%) have expected count less than 5. The minimum expected count is 1.20.

b. Computed only for a 2x2 table

Risk Estimate

	Value	95% Confidence Interval	
		Lower	Upper
Odds Ratio for Diabetes Mellitus (Ya / Tidak)	1.429	.100	20.437
For cohort Fungsi Kognitif = Gangguan Fungsi Kognitif	1.333	.153	11.641
For cohort Fungsi Kognitif = Normal	.933	.566	1.539
N of Valid Cases	15		

Dislipidemia * Fungsi Kognitif

Crosstab

			Fungsi Kognitif		Total
			Gangguan Fungsi Kognitif	Normal	
Dislipidemia	Ya	Count	1	7	8
		% within Fungsi Kognitif	33.3%	58.3%	53.3%
	Tidak	Count	2	5	7
		% within Fungsi Kognitif	66.7%	41.7%	46.7%
Total		Count	3	12	15
		% within Fungsi Kognitif	100.0%	100.0%	100.0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	.603 ^a	1	.438		
Continuity Correction ^b	.017	1	.897		
Likelihood Ratio	.608	1	.436		
Fisher's Exact Test				.569	.446
Linear-by-Linear Association	.563	1	.453		
N of Valid Cases	15				

a. 2 cells (50.0%) have expected count less than 5. The minimum expected count is 1.40.

b. Computed only for a 2x2 table

Risk Estimate

	Value	95% Confidence Interval	
		Lower	Upper
Odds Ratio for Dislipidemia (Ya / Tidak)	.357	.025	5.109
For cohort Fungsi Kognitif = Gangguan Fungsi Kognitif	.438	.050	3.853
For cohort Fungsi Kognitif = Normal	1.225	.716	2.095
N of Valid Cases	15		

Obesitas * Fungsi Kognitif

Crosstab

			Fungsi Kognitif		
			Gangguan Fungsi Kognitif	Normal	
			Kognitif	Normal	Total
Obesitas	Ya	Count	1	3	4
		% within Fungsi Kognitif	33.3%	25.0%	26.7%
	Tidak	Count	2	9	11
		% within Fungsi Kognitif	66.7%	75.0%	73.3%
Total		Count	3	12	15
		% within Fungsi Kognitif	100.0%	100.0%	100.0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	.085 ^a	1	.770		
Continuity Correction ^b	.000	1	1.000		
Likelihood Ratio	.082	1	.774		
Fisher's Exact Test				1.000	.637
Linear-by-Linear Association	.080	1	.778		
N of Valid Cases	15				

a. 3 cells (75.0%) have expected count less than 5. The minimum expected count is .80.

b. Computed only for a 2x2 table

Risk Estimate

	Value	95% Confidence Interval	
		Lower	Upper
Odds Ratio for Obesitas (Ya / Tidak)	1.500	.098	23.069
For cohort Fungsi Kognitif = Gangguan Fungsi Kognitif	1.375	.167	11.343
For cohort Fungsi Kognitif = Normal	.917	.488	1.722
N of Valid Cases	15		

Merokok * Fungsi Kognitif

Crosstab

			Fungsi Kognitif		Total
			Gangguan Fungsi Kognitif	Normal	
Merokok	Ya	Count	1	3	4
		% within Fungsi Kognitif	33.3%	25.0%	26.7%
	Tidak	Count	2	9	11
		% within Fungsi Kognitif	66.7%	75.0%	73.3%
Total		Count	3	12	15
		% within Fungsi Kognitif	100.0%	100.0%	100.0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	.085 ^a	1	.770		
Continuity Correction ^b	.000	1	1.000		
Likelihood Ratio	.082	1	.774		
Fisher's Exact Test				1.000	.637
Linear-by-Linear Association	.080	1	.778		
N of Valid Cases	15				

a. 3 cells (75.0%) have expected count less than 5. The minimum expected count is .80.

b. Computed only for a 2x2 table

Risk Estimate

	Value	95% Confidence Interval	
		Lower	Upper
Odds Ratio for Merokok (Ya / Tidak)	1.500	.098	23.069
For cohort Fungsi Kognitif = Gangguan Fungsi Kognitif	1.375	.167	11.343
For cohort Fungsi Kognitif = Normal	.917	.488	1.722
N of Valid Cases	15		

Pola Hidup Sedentari * Fungsi Kognitif

Crosstab

			Fungsi Kognitif		Total
			Gangguan Fungsi Kognitif	Normal	
Pola Hidup Sedentari	Ya	Count	1	2	3
		% within Fungsi Kognitif	33.3%	16.7%	20.0%
	Tidak	Count	2	10	12
		% within Fungsi Kognitif	66.7%	83.3%	80.0%
Total		Count	3	12	15
		% within Fungsi Kognitif	100.0%	100.0%	100.0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	.417 ^a	1	.519		
Continuity Correction ^b	.000	1	1.000		
Likelihood Ratio	.380	1	.538		
Fisher's Exact Test				.516	.516
Linear-by-Linear Association	.389	1	.533		
N of Valid Cases	15				

a. 3 cells (75.0%) have expected count less than 5. The minimum expected count is .60.

b. Computed only for a 2x2 table

Risk Estimate

	Value	95% Confidence Interval	
		Lower	Upper
Odds Ratio for Pola Hidup Sedentari (Ya / Tidak)	2.500	.146	42.800
For cohort Fungsi Kognitif = Gangguan Fungsi Kognitif	2.000	.260	15.381
For cohort Fungsi Kognitif = Normal	.800	.346	1.852
N of Valid Cases	15		

Onset Strpke * Fungsi Kognitif

Crosstab

		Onset Stroke		Total
		3 bulan	> 3 bulan	
Fungsi Kognitif	Gangguan Fungsi Kognitif	0	3	3
	Normal	5	7	12
Total		5	10	15

Chi-Square Tests

	Value	Df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	1.875 ^a	1	.171	.505	.264
Continuity Correction ^b	.469	1	.494		
Likelihood Ratio	2.795	1	.095		
Fisher's Exact Test					
Linear-by-Linear Association	1.750	1	.186		
N of Valid Cases	15				

a. 3 cells (75.0%) have expected count less than 5. The minimum expected count is 1.00.

b. Computed only for a 2x2 table

Risk Estimate

	Value	95% Confidence Interval	
		Lower	Upper
For cohort Onset Stroke = > 3 bulan	1.714	1.063	2.765
N of Valid Cases	15		

Logistic Regression

Case Processing Summary

Unweighted Cases ^a		N	Percent
Selected Cases	Included in Analysis	15	100.0
	Missing Cases	0	.0
	Total	15	100.0
Unselected Cases		0	.0
Total		15	100.0

a. If weight is in effect, see classification table for the total number of cases.

Dependent Variable Encoding

Original Value	Internal Value
Gangguan Fungsi Kognitif	0
Normal	1

Categorical Variables Codings

		Frequency	Parameter coding (1)
Penyakit Kardiovaskular	Ya	4	1.000
	Tidak	11	.000
Hipertensi	Ya	11	1.000
	Tidak	4	.000

Block 0: Beginning Block**Classification Table^{a,b}**

		Predicted			
	Observed	Fungsi Kognitif		Percentage Correct	
		Gangguan Fungsi Kognitif	Normal		
Step 0	Fungsi Kognitif	Gangguan Fungsi Kognitif	0	3	.0
		Normal	0	12	100.0
	Overall Percentage				80.0

a. Constant is included in the model.

b. The cut value is .500

Variables in the Equation

	B	S.E.	Wald	df	Sig.	Exp(B)
Step 0 Constant	1.386	.645	4.612	1	.032	4.000

Variables not in the Equation

	Score	df	Sig.
Step 0 Variables Hipertensi(1)	3.068	1	.080
Penyakit_Kardiovaskular(1)	3.068	1	.080
Overall Statistics	6.279	2	.043

Block 1: Method = Backward Stepwise (Likelihood Ratio)

Omnibus Tests of Model Coefficients

		Chi-square	df	Sig.
Step 1	Step	7.374	2	.025
	Block	7.374	2	.025
	Model	7.374	2	.025

Model Summary

Step	-2 Log likelihood	Cox & Snell R Square	Nagelkerke R Square
1	7.638 ^a	.388	.614

a. Estimation terminated at iteration number 20 because maximum iterations has been reached. Final solution cannot be found.

Hosmer and Lemeshow Test

Step	Chi-square	df	Sig.
1	.000	2	1.000

Contingency Table for Hosmer and Lemeshow Test

		Fungsi Kognitif = Gangguan Fungsi Kognitif		Fungsi Kognitif = Normal		Total
		Observed	Expected	Observed	Expected	
Step 1	1	1	1.000	0	.000	1
	2	1	1.000	2	2.000	3
	3	1	1.000	2	2.000	3
	4	0	.000	8	8.000	8

Classification Table^a

		Predicted			
		Fungsi Kognitif		Percentage Correct	
Observed		Gangguan Fungsi Kognitif	Normal		
Step 1	Fungsi Kognitif	Gangguan Fungsi Kognitif	1	2	33.3
		Normal	0	12	100.0
	Overall Percentage				86.7

a. The cut value is .500

Variables in the Equation

		B	S.E.	Wald	df	Sig.	Exp(B)	95% C.I. for EXP(B)	
								Lower	Upper
Step 1 ^a	Hipertensi(1)	20.765	13180.5 77	.000	1	.999	104236564 6.877	.000	.
	Penyakit_Kardiovas kular(1)	- 20.765	13180.5 77	.000	1	.999	.000	.000	.
	Constant	.693	1.225	.320	1	.571	2.000		

a. Variable(s) entered on step 1: Hipertensi, Penyakit_Kardiovaskular.

Model if Term Removed

Variable		Model Log Likelihood	Change in -2 Log Likelihood	df	Sig. of the Change
Step 1	Hipertensi	-6.124	4.609	1	.032
	Penyakit_Kardiovaskular	-6.124	4.609	1	.032

Lampiran 5. Biodata Mahasiswa**Identitas**

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Riwayat Pendidikan Formal

- | | | |
|-------------|----------------------------|--------------------|
| 1. SD | : Pius Purbalingga | Lulus tahun : 2006 |
| 2. SMP | : SMP Negeri 1 Purbalingga | Lulus tahun : 2009 |
| 3. SMA | : SMA Negeri 1 Purbalingga | Lulus tahun : 2012 |
| 4. FK UNDIP | : Masuk tahun : 2012 | |